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PTO/SB/30 (10-01)

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<b>REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL</b> Address to: MS RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/801,769
	Filing date	May 16, 2004
	First Named Inventor	Schmitz
	Art Unit	3671
	Examiner Name	Tara L. Mayo
	Attorney Docket Number	8929-3049

**This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.**

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

**1. Submission required under 37 CFR 1.114**

- a. ☐ Previously submitted
- i. ☐ Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on \_\_\_\_\_.  
(Any unentered amendment(s) referred to above will be entered).
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_.
- b. ☒ Enclosed
- i. ☒ Amendment(s)/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☐ Other \_\_\_\_\_

**2. Miscellaneous**

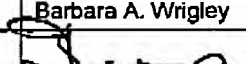
- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(l) required)
- b. ☐ Other \_\_\_\_\_

**3. Fees**

The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 50-1901.
- i. ☐ RCE fee required under 37 CFR 1.17(e) – Small Entity Fee \$395.
- ii. ☐ Extension of time fee (37 CFR 1.138 and 1.17)
- iii. ☐ Other \_\_\_\_\_
- b. ☐ Check in the amount of \$\_\_\_\_\_ enclosed.
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.****SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

Name (Print/Type)	Barbara A. Wrigley	Registration No. (Attorney/Agent)	34,950
Signature		Date:	11/14/05

**CERTIFICATE OF MAILING OR TRANSMISSION**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313 on this date: November 14, 2005.

Name (Print/Type)	Cristine A. Williams	Date:	November 14, 2005
Signature	